

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS5405PCA	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/01/2011
NAME OF PROVIDER OR SUPPLIER A HELPING HAND		STREET ADDRESS, CITY, STATE, ZIP CODE 811 S DECATUR BLVD LAS VEGAS, NV 89107		
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P 000	<p>Initial Comments</p> <p>This findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>This Statement of Deficiencies was generated as a result of the Focused State Relicensure survey and two Complaint Investigations conducted in your agency on 2/9/2011 and finalized on 3/1/2011. The Focused State Relicensure survey was conducted at your agency by authority of Chapter 449, Personal Care Agencies. The Complaint Investigations were conducted in accordance with Nevada Revised Statutes, Chapter 449, Personal Care Agencies.</p> <p>The patient census was 235. Twelve client records were reviewed. One client home visit was conducted. Ten client telephone interviews were conducted. Six employee files were reviewed.</p> <p>Complaint #NV00027229 listed the following allegations:</p> <ol style="list-style-type: none"> 1. The caregiver (Employee #6) attempted to change the client's house key, but the complainant stopped it. The caregiver kept the house key with her instead of returning it to the lock box after her visit. She also took the client's spare house key and mailbox key. 2. The caregiver kept the client's food card and did not return it to the client after grocery shopping; nor did she leave receipts after shopping. 3. The client was not bathed or showered regularly; as a result when contracted a urinary 	P 000		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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P 000	<p>Continued From page 1</p> <p>tract infection and was hospitalized twice at Spring Valley Hospital, on 11/21/10 to 11/25/10 and 12/18/10 to 12/22/10.</p> <p>4. The caregiver cashed the client's checks and there was \$90 missing. Also, a gift Client #1 bought for her nurse has disappeared from the client's home.</p> <p>5. The caregiver used a rubber stamp with Client #1's signature. She used the stamp for her timesheets, which included the days when Client #1 was in the hospital and did not receive care from the caregiver. The stamp is now missing.</p> <p>6. The caregiver put undo stress on Client #1 and would make her nervous and coerced her to agree to things the caregiver wanted i.e. changing her schedule, cashing her check. The complainant stated Client #1 would just say "yes" to everything the caregiver wanted.</p> <p>7. The caregiver unplugged the phone so Client #1 would not call the agency if she did not come to provide the service the next day. The complainant learned of the unplugged phone from the Medicaid office employee.</p> <p>8. On 12/24/10 the complainant found the caregiver at Client #1's home at 4:30 PM instead of 5:00 PM when she was scheduled to be there. The complainant was concerned about the change in time because it would cause the caregiver to put Client #1 to bed too early. While visiting with Client #1 that day the PCA agency staff, Employee #5, called the police and the complainant was asked to leave.</p> <p>9. 12/25/10 the complainant took food to Client #1. Again the police were called, came to the home and cited her for trespassing. The complainant was given a warning that if she came back, she would be arrested. She was issued and Event Number 0999. The complainant did not receive a citation, just a card with the</p>	P 000			

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P 000	<p>Continued From page 2</p> <p>officer's names.</p> <p>10. The caregiver and the Medicaid CHIPS supervisor took out the client's power chair and left it in the middle of the room. The complainant stated she did not want the power chair taken out and left in the middle of the room.</p> <p>11. On 12/26/10 the complainant went to Client #1's home and found her in the dark. The caregiver had not been to the home that day, so the client had missed her medications, nor did she receive lunch or dinner that day.</p> <p>12. The complainant reported that one day, the OT/PT informed the complainant that there was no food in Client #1's house, the client was hungry, so she microwaved a frozen burrito for her.</p> <p>13. The OT/PT reported that she could not find documents in the client's apartment - no care plan, no timesheets, no discharge papers from her last hospitalization in December. The OT/PT stated that she would help the complainant file a case against the PCA agency and that she would put her observations in writing.</p> <p>The allegation #12 regarding quality of care was substantiated; however there were no regulatory deficiencies identified through observations, document review, record review or interviews with facility staff. All other allegations of this complaint were unsubstantiated.</p> <p>Complaint #NV00027166 listed the following allegations:</p> <ol style="list-style-type: none"> 1. Client #2 was not bathed adequately by Employee #3. 2. One time the complainant found Client #2 with no underwear, and left soaking wet with urine by Employee #3. 3. The client was not provided three meals a day 	P 000			

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P 000	<p>Continued From page 3</p> <p>and the complainant stated Client #2 was always hungry. The caregiver would give the client only peanut butter and cheese, although food was always available in the refrigerator. The caregiver would not take the time to heat a frozen dinner or prepare a meal.</p> <p>4. On 12/12/10 Employee #4 came to provide services to Client #2 in the morning, but did not come in the afternoon as scheduled. At 5:30 PM that evening the complainant found Client #2 eating popcorn, the house was not cleaned and smelled like urine; the client's diaper had not been changed.</p> <p>5. That same day the complainant found the door to the client's apartment locked. The Complainant explained the door was to remain unlocked in case of an emergency. The Homeowners Association for the building was aware that the client's door remained unlocked during the day.</p> <p>6. The complainant stated she spoke with the agency's owner, Employee #1, about her complaints but they were not resolved. These allegations were also witnessed by other family members.</p> <p>Allegation #6 that the agency failed to resolve the complaints raised by the family of Client #2 was substantiated. All other allegations of this complaint were unsubstantiated.</p> <p>The complaint investigation included observation, interviews, and record review:</p> <p>-Observations of the agency on 2/9/2011 included observing office operations and problem solving.</p> <p>-Interviews were conducted with Employees #1 and #2 to review the allegations of the complaints and advise them of the survey process. Staff at</p>	P 000			

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P 000	Continued From page 4 the Medicaid office and clinical staff from a home health agency. -Review of the following documents: List of all clients and employees; Agency Records for Clients #1 through Client # 10; Employee Records for Employee #1 through Employee #7; -Review of the Administrative Policies and Procedures as well as the Standard Operating Policies and Procedures; the Complaint/Incident Log; Infections Control Binder; Training materials for Caregivers; PCA Timesheets; Client Information Packet; Annual Client Survey and other documentation for Supervisory Evaluations. The following regulatory deficiencies were identified:	P 000			
P 450	Section 21.1(2) Grievance Procedure 2. The administrator of an agency shall establish and enforce a procedure to respond to grievances, incidents and complaints concerning the agency in accordance with the written policies and procedures of the agency. The procedure established and enforced by the administrator must include a method for ensuring that the administrator or his designee is notified of each grievance, incident or complaint. The administrator or his designee shall personally investigate the matter in a timely manner. A client who files a grievance or complaint or reports an incident concerning the agency must be notified of the action taken in response to the grievance, complaint or report or must be given a reason why no action was taken.	P 450			

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P 450	<p>Continued From page 5</p> <p>This STANDARD is not met as evidenced by: Based on record review, policy review and staff interview, the agency failed to provide a procedure for complaint and/or grievance resolution that met all regulatory requirements.</p> <p>The family of Client #2 stated several complaints were reported to the agency regarding the quality of care provided for Client #2 by Employee #3 and Employee #4. A review of documentation and staff interviews revealed the agency failed to follow their administrative policy and procedure for complaint and /or grievance resolution.</p> <p>Scope: 1 Severity: 2</p>	P 450			

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